

IFW

TRANSMITTAL
FORM

Application Number	10/805,818
Filing Date	March 22, 2004
First Named Inventor	Chun Kong Li
Art Unit	3752
Examiner Name	Trevor Edwin McGraw
Attorney Docket Number	203248-0094

Total Number of Pages in This Submission 12

ENCLOSURES (check all that apply)

- ☒ Amendment/Reply – 8 pages
☒ Before Final
☐ After Final
☐ Affidavits/Declarations
☐ Information Disclosure Statement
☐ PTO-1449 Form(s)
☐ Cited References
☐ Certified Copy of Priority Document
☐ Response to Missing Parts/Incomplete Application
☐ Terminal Disclaimer
☐ Submission of Formal Drawings
☒ Other: Annotated Marked-Up Drawing – 1 page
Replacement Sheet – 1 page

PETITION FOR EXTENSION OF TIME

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

- ☐ Applicant(s) claims small entity status under 37 CFR 1.27.
☒ Applicant(s) petitions for a three-month extension of time and pay the fee of \$1,020.00 (37 CFR 1.17(a)(1)-(5)).
☐ Applicant(s) believes that no petition for an extension of time is necessary (37 CFR 1.36(c)); however, applicant(s) hereby petition for sufficient extension of time to render the present submission timely.

CLAIMS FEES

- ☒ No additional claim fee is required.

				Small Entity		Large Entity	
	Claims Remaining After Amendment		Highest Number Previously Paid For	Extra Claims Present	Rate	Addit. Claim Fee	Rate
Total	15	-	20	=0	x 25=	\$0	x 50=
Independent	3	-	3	=0	x 100=	\$0	x 200=
<input type="checkbox"/> First Presentation of Multiple Claim					+ 180=	\$0	+ 360=

FEES

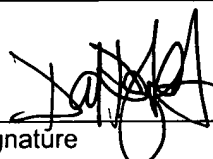
<input type="checkbox"/> Additional Claim Fee	\$0.00
<input checked="" type="checkbox"/> Extension fee for three-month	\$1,020.00
<input type="checkbox"/> Information Disclosure Statement	\$0.00
<input type="checkbox"/> Surcharge for Missing Parts – Declaration	\$0.00
<input type="checkbox"/> Terminal Disclaimer	\$0.00
TOTAL FEES	\$225.00

PAYMENT OF FEES

- ☐ A check in the amount of \$ 0.00 is enclosed.
☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1965. A duplicate copy of this transmittal is attached for this purpose.
☒ The Director is authorized to charge Deposit Account Number 50-1965 in the amount of \$1,020.00.

SIGNATURE OF ATTORNEY

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Signature

Date: June 28, 2006

CERTIFICATE OF TRANSMISSION/MAILING

- I hereby certify that this correspondence is:
☐ being facsimile transmitted to the USPTO, facsimile number (571) 273-8300.
☒ deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below

Typed or printed name	Elizabeth M. Campbell Tressler	Date: June 28, 2006
Signature	